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03945 U.S. PTO  
10/646071  
08/22/03

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## **MAIL STOP PATENT APPLICATION**

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

### **CERTIFICATE OF MAILING BY "EXPRESS MAIL"**

**Attorney Docket No. :** INDYM.004A

**Applicant(s) :** Steven A. Deal

**For :** GRAPHICAL MERCHANDISE LOCATOR

**Attorney :** Raymond B. Hom

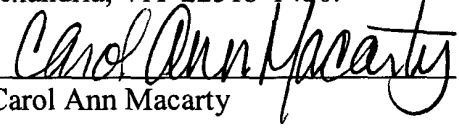
**"Express Mail"**  
**Mailing Label No. :** EV 323832813 US

**Date of Deposit :** August 22, 2003

I hereby certify that the accompanying

Transmittal letter; Specification in 26 pages; 6 sheets of drawings; **SIGNED**  
Declaration by Inventor in 1 page; Recordation Form Cover Sheet with 1 page  
Assignment; Power of Attorney by Assignee in 2 pages, with copy of  
Assignment; Check for Filing Fees; Return Prepaid Postcard

are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and are addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

  
Carol Ann Macarty

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**PATENT**

Attorney Docket No. INDYM.004A

Date: August 22, 2003

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P.O. Box 1450  
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ATTENTION: MAIL STOP PATENT APPLICATION

Sir:

Transmitted herewith for filing is the patent application of

Inventor: **Steven A. Deal**

For: **GRAPHICAL MERCHANDISE LOCATOR**

Enclosed are:

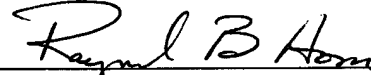
- (X) 6 sheets of drawings.
- (X) Recordation form cover sheet with 1-page assignment.
- (X) A power of attorney form and copy of assignment.
- (X) Initial signed declaration by inventor.
- (X) Return prepaid postcard.

The present application qualifies for small entity status under 37 C.F.R. § 1.27. The fees are calculated below:

CLAIMS AS FILED				
FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE
Basic Fee			\$375	\$375
Total Claims	27 - 20 =	7 ×	\$9	\$63
Independent Claims	7 - 3 =	4 ×	\$42	\$168
If application contains any multiple dependent claims(s), then add			\$140	\$0
<b>TOTAL FILING FEE</b>		<b>\$606</b>		

- (X) A check in the amount of \$606 to cover the filing fee is enclosed.
- (X) A check in the amount of \$40.00 to cover the assignment recording fee.
- (X) The Commissioner is hereby authorized to charge any additional fees which may be required, now or in the future, or credit any overpayment to Account No. 11-1410.

(X) Please use Customer No. 20,995 for the correspondence address.



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